

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is
submitted between December 1 and January 31.

66105
Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 2-16-98

1980863

#540796
\$10.00
FB

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

1. NAME HARGROVE PAUL B
Last First MI
2. BUSINESS PHONE 318-388-9487
Area Code and Phone Number
3. BUSINESS ADDRESS 100 CENTURY PARK DR. MONROE LA 71203
Street and No. City State Zip
4. EMPLOYER CENTURY TELEPHONE ENTERPRISES, INC.
5. EMPLOYER'S ADDRESS 100 CENTURY PARK DR. MONROE LA 71203
Street and No. City State Zip
6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.
1. Name CENTURY TELEPHONE ENTERPRISES, INC.
Address 100 CENTURY PARK DR. MONROE, LA 71203
Business or purpose TELECOMMUNICATIONS
Does this person pay you? YES
If No, who pays you? _____
2. Name LOUISIANA TELEPHONE ASSOCIATION
Address 7266 TOM DR., SUITE 205 BATON ROUGE, LA 70806
Business or purpose REPRESENT LOUISIANA TELEPHONE COMPANIES BEFORE LEGISLATIVE, REGULATORY AND ADMINISTRATIVE AGENCIES
Does this person pay you? NO
If No, who pays you? CENTURY TELEPHONE ENTERPRISES, INC.

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3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
5. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

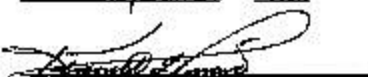
State of LOUISIANA

Parish of OUACHITA

Before me, the undersigned authority, personally came and appeared PAUL B. HARGROVE, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.


Signature of Lobbyist

Sworn to and subscribed before me on this 12TH day of
JANUARY, 1998


Notary Public

Rev. 8/97

